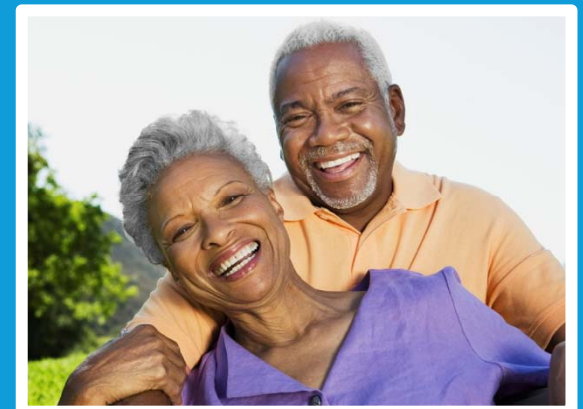


# State of Georgia Retiree Benefit Presentation 2010 Plan Year



Presented by State Health Benefit Plan

# Department of Community Health (DCH) Mission

## ACCESS



Access  
to affordable,  
quality health  
care in our  
communities

## RESPONSIBLE



Responsible  
health planning  
and use of  
health care  
resources

## HEALTHY



Healthy  
behaviors and  
improved  
health  
outcomes

# Department of Community Health (DCH) Initiatives - FY 2008 and FY 2009

## FY 2008

**Medicaid Transformation**  
**Health Care Consumerism**  
**Financial Integrity**  
**Solutions for the Uninsured**  
**Medicaid Program Integrity**  
**Workforce Development**  
**PeachCare for Kids Program Stability**  
**Customer Service and Communication**

## FY 2009

**Medicaid Transformation**  
**Health Care Consumerism**  
**Financial Integrity**  
**Health Improvement**  
**Solutions for the Uninsured**  
**Medicaid Program Integrity**  
**Workforce Development**  
**PeachCare for Kids™ Program Stability**  
**Customer Service**

# Retiree Benefits – 2010 Plan Year

Things we will cover:

- What are the Plan Options?
- How do the Plan Options work?
- What are the features of the Plan Options?
- What are the Plan benefits?
- What are the enrollment requirements?
- Where do I go for help if I have questions?



## SHBP Policy Change – January 1, 2010

- The financial situation of the state is requiring that certain plan changes be made. On January 1, all current Medicare eligible retirees, and their Medicare eligible spouse and/or children will need to enroll in one of the Medicare Advantage with prescription drugs (MAPD) private fee for service (PFFS) Options offered by CIGNA and UnitedHealthcare in order to continue to receive the state contribution to the cost of their health insurance
- This change will also apply to all future retirees when they become Medicare eligible
- SHBP's objective is always to offer active employees and retirees the best coverage available at the lowest premium.

## **Kaiser Members not eligible for the MAPD Plans - 2010 Plan Year**

- Kaiser Permanente will no longer be offered
- Members will need to make an election for a new option during the Retiree Option Change Period this fall
- Members who are not eligible for Medicare and do not make a new election will default to the CIGNA HRA option
- Members with Medicare coverage who do not make another election will default to the CIGNA Medicare Advantage Standard Option
- The SHBP options that Kaiser members can select from provide extensive benefits and most of the Kaiser community specialists are participating in one or more of these options



## SHBP Plan and Premium Changes – (non MAPD PFFS Options) - 2010 Plan Year

- The SHBP coordination of benefits (COB) policy will change to a non-duplication of benefits for COB for the PPO, OAP and HRA options (all other options already have this provision)

HDHP Plan Changes								
Coverage	Deductible IN		Out of Pocket Max. IN		Deductible OON		Out of Pocket Max. IN	
	From	To	From	To	From	To	From	To
Single	\$1,150	\$1,200	\$1,700	\$1,800	\$2,300	\$2,400	\$3,800	\$4,000
Family	\$2,300	\$2,400	\$2,900	\$3,100	\$4,600	\$4,800	\$7,000	\$7,400

## Retiree Plan Options – 2010 Plan Year

- Medicare Advantage with prescription drugs (MAPD) Private Fee-for-Service Option (PFFS)
  - *This current option used by many retirees will be called the MAPD Standard Plan*
- A new MAPD Option called the MAPD Premium Plan will be added January 1, 2010
- CIGNA and UnitedHealthcare (UHC) will both continue to offer the MAPD PFFS options for 2010



## Retiree Plan Options for 65+ – 2010 Plan Year

- Both MAPD PFFS Options are plans that provide comprehensive and cost effective benefits
- Custom plans designed by SHBP
- Approved by the Centers for Medicare & Medicaid Services (CMS)
- Designed to have lower monthly premiums and lower out-of-pocket expenses
- Designed to provide protection against the high medical costs that come with an unexpected illness or injury

# How MAPD PFFS Options Work

- These plans provide **all the benefits** found with Original Medicare – Parts A and B – plus so much more
- Includes prescription Part D coverage
- Does not require contracting with a provider network
- Does not require patients to gain authorization or referrals (except for certain prescriptions)
- Requires the provider to be “Deemed” (accept the insurer’s terms and conditions and Medicare payment rates with no balance billing) in order for the expenses to be covered



## How MAPD PFFS Options Work

- Retirees no longer need to show two ID cards
- Show your MAPD card only and claims are filed directly to your vendor and you will receive just one explanation of benefits
- A dedicated customer service team will help you with any questions or concerns

## How does my doctor become a Participating Provider under the MAPD PFFS Options?

- All you have to do is ask your doctor if he accepts this Plan and then show your MAPD card when you arrive for your appointment. It's that simple!
- If your doctor or hospital does not agree to be a Deemed Provider, there will be no benefits **for that provider** under the MAPD options unless it is for an emergency.



## Plan Features for the 2010 Plan Year

- The **MAPD PFFS Plan Option** is the existing MAPD PFFS option currently offered and will be offered in 2010 with no changes in benefits
- The name will change to the **MAPD PFFS Standard Plan Option** for 2010 as a new option will also be offered
- This **MAPD PFFS Standard Option** has **lower** monthly premiums but **higher** co-pays than the **MAPD PFFS Premium Plan Option**. This option may be right for someone who doesn't expect to have frequent visits for medical care

## Plan Features for the 2010 Plan Year

- The **MAPD PFFS Premium Plan Option** has **higher** monthly premiums but **lower** co-pays and out-of-pocket costs than the **MAPD PFFS Standard Plan Option**
- The **MAPD PFFS Premium Plan Option** may be right for someone who expects more frequent visits for medical care, exams and tests



# What are the benefits of the Medicare Advantage MAPD PFFS Options for Retirees

- No lifetime maximums
- No deductibles
- Primary Care Physician copays:
  - \$20 per visit – *Standard Plan*
  - \$10 per visit – *Premium Plan*
- Specialist copays:
  - \$25 per visit – *Standard Plan*
  - \$20 per visit – *Premium Plan*

Remember office visit and prescription copays do not apply to the Out-of-Pocket Maximum

# What are the benefits of the MAPD PFFS Plans for Retirees

- Coverage for preventive care services
- Unlimited hospitalization
- Annual routine eye exams
- Prescription drug coverage in the coverage gap (no donut hole and no deductible)
- Routine glasses, contact lenses and frames (\$125 maximum every 2 years)
- Routine hearing exams and hearing aid benefit (\$1,000 maximum every 4 years)



## What about my prescription drugs under the MAPD PFFS Plan Options?

- You no longer need a separate Medicare Part D plan. The MAPD PFFS option includes prescription drugs
- When you enroll in the MAPD PFFS option during the ROCP, your Part D coverage will automatically be discontinued
- Each plan has a drug list that can be found on the plan's web site or by calling the plan's customer service department

## What about my prescription drugs under the MAPD PFFS Plan Options?

- Your co-pays will be as follows:

	<b>Standard</b>	<b>Premium</b>
Tier-One	\$10	\$10
Tier-Two	\$25	25% up to max of \$25
Tier-Three/Four	\$50	25% up to max of \$50

- You will only pay your copay amount until you reach the \$4,550 out-of-pocket limit. Once you reach this limit, you will pay the greater of 5 percent coinsurance or reduced copays for all covered drugs (\$2.50 - \$6.30) for the remainder of the calendar year

## Enrollment in the MAPD PFFS Options 2010 Plan Year

- Minimum eligibility to participate is enrollment in Medicare Part B and preferably Parts A and B by the retiree and/or spouse, whichever is eligible based on age or disability
- Retirees and/or their spouses age 65 or older who are NOT enrolled in Medicare Part B will see a substantial increase in premiums in 2010 and are encouraged to enroll during Medicare's general enrollment January 1 - March 31, 2010

## **What if my spouse isn't eligible to participate in the MAPD PFFS Plan?**

- Your spouse may select from any other SHBP Plan – (You will have the MAPD PFFS plan and your spouse will have the SHBP Plan he/she selected)

## **What if my spouse is eligible to participate in the MAPD PFFS Plan and I'm not?**

- Your spouse may enroll in the MAPD PFFS option and you must enroll in one of the other SHBP Options

## When Can I enroll in one of the MAPD PFFS Options?

- The Retiree Option Change Period is October 9 through November 10, and you may enroll by:
  - Logging onto the Web site at [www.oe2010.ga.gov](http://www.oe2010.ga.gov)
  - Calling your selected insurance carriers
    - UHC - (877) 755-5343
    - CIGNA - (800) 942-6724
  - Completing and mailing a paper enrollment form must be postmarked by November 10, 2009
- You **only** need to do **one** of the above to enroll in one of the MAPD PFFS Options

## What happens if I don't enroll in one of the MAPD PFFS Plans?

- If you are currently enrolled in UnitedHealthcare and do not make an election, your coverage will automatically roll to the United Healthcare Medicare Advantage Standard Plan
- If you are currently enrolled in CIGNA or Kaiser and do not make an election, your coverage will automatically roll to the CIGNA Medicare Advantage Standard Plan
- You don't have to take any action if these options are what you want

## Kaiser Medicare Eligible Members – 2010 Plan Year

- Kaiser Permanente will no longer be offered
- Members will need to make an election for a new option during the Retiree Option Change Period this fall
- Members with Medicare coverage who do not make another election will default to the CIGNA Medicare Advantage Standard Option



## What happens if I don't want to enroll in one of the MAPD PFFS Plans?

- You may enroll in the PPO, OAP, HMO, HRA or HDHP Plans but will pay the entire cost of the premium
- Claims will be processed based on the Parts of Medicare you have



## If You Have Questions

More information about your Plan choices is available by contacting the insurance carriers at:

[www.CIGNA.com/SHBP](http://www.CIGNA.com/SHBP) (800) 942-6724

[www.uhcretiree.com/shbp](http://www.uhcretiree.com/shbp) (877) 755-5343

- SHBP will mail a Retiree Option Change Packet to your home (if we have your correct home address) prior to the start of the Retiree Option Change Period

## Closing

**This concludes the SHBP portion of the presentation.**

The next section will be presented by CIGNA and then UnitedHealthcare. After that, we will share with you the answers to some questions we have frequently been asked.

## Frequently Asked Questions and Answers

**Q. Are the Medicare Advantage with Prescription Drugs, Private Fee for Service (MAPD) PFFS options offered to State Health Benefit Plan (SHBP) retirees the same as the other plans retirees can purchase?**

**A.** No. The MAPD PFFS options offered by SHBP are custom options designed to reduce retirees' out-of-pocket expenses.

**Q. How do I find out if my prescription medications will be covered under the MAPD PFFS plans?**

**A.** You can access the Web or call Customer Service at:

CIGNA (800) 942-6724, [www.CIGNA.com/SHBP](http://www.CIGNA.com/SHBP)

UHC (877) 755-5343, [www.uhcretiree.com/shbp](http://www.uhcretiree.com/shbp)



## Frequently Asked Questions and Answers

- Q. What do I do if my provider isn't participating in one of the MAPD PFFS options and I don't want to change doctors?**
- A. You can ask CIGNA or UHC to reach out to the provider to see if he/she is willing to participate. If the provider refuses to accept the terms and conditions, you will need to change providers.

## Frequently Asked Questions and Answers

- Q. My spouse isn't Medicare eligible, therefore, isn't eligible to participate in the MAPD PFFS plan, what options does he/she have to choose from?**
- A.** He/she may select from the PPO, OAP, HMO, HRA and HDHP options.
- Q. What will the premiums be for both of us?**
- A.** You will pay the single rate for the MA you select and the single rate of the option your spouse selects.

## Closing

This concludes the 2010 Retiree presentation.



# Disclaimers

- A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your doctor or hospital is not required to agree to accept the plan's terms and conditions, and thus may choose not to treat you with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may choose not to provide health care services to you, except in emergencies. Providers can find the plan's terms and conditions on [www.cignamedicare.com](http://www.cignamedicare.com) (CIGNA) or [www.UnitedHealthcareonline.com/pffs](http://www.UnitedHealthcareonline.com/pffs) (United).
- CIGNA Medicare Services, "CIGNA Medicare Access Plus Rx" and the "Tree of Life" logo are registered service marks of CIGNA Intellectual Property, Inc., licensed for use by CIGNA Corporation and its operating subsidiaries. Products are offered by these operating subsidiaries, each of which is a Medicare Advantage Organization with a Medicare contract, and not by CIGNA Corporation. Connecticut General Life Insurance Company offers CIGNA Medicare Access Plus Rx to employers nationally. In Arizona, CIGNA Medicare Access Plus Rx is offered to employers and individuals only through CIGNA HealthCare of Arizona, Inc., in all counties other than Gila, Pinal and Yuma.
- OptumHealthSM is a health and well-being company that provides information and support as part of your health plan. NurseLineSM nurses cannot diagnose problems or recommend specific treatment and are not a substitute for your doctor's care. NurseLine services are not an insurance program and may be discontinued at any time.
- SilverSneakers® is a registered trademark of Healthways, Inc. Healthways, Inc., is an independent company. Consult a health care professional with questions about your health care needs.
- SecureHorizons® MedicareDirectTM, a Medicare Advantage Private Fee-For-Service Plan, is offered by UnitedHealthcare Insurance Company or an affiliated company, a Medicare Advantage Organization with a Medicare contract.
- Limitations, copayments and coinsurance may apply. Benefits may vary by employer group.



# We're CIGNA



- 80-year history
- 26,600 employees worldwide
- Fortune 200 Company

Over **40 years** in Medicare

We're focused on  
**YOU**





# CIGNA Medicare Access Plus RX



**Will my doctor accept these plans?**

- 97% of Georgia doctors accept our plans.

**Do the plans cover my important medications?**

- 94% of common drugs are covered

**How do these plans compare to my current plan?**

- No networks. No referrals. You can see any doctor\*

## More Questions?

# Call Us



\*Who works with Medicare and agrees to the plans' terms and conditions of payment.

# The Rewards of CIGNA Medicare Access Plus Rx



- CIGNA 24-Hour Health Information Line<sup>SM</sup>
- myCIGNA – personal health information secure and online
- CIGNA's Healthy Rewards<sup>®</sup> Program – discounts of up to 60%
- National Council on Aging
  - Save on meals, utility bills, legal and tax assistance
  - Double Homestead Property Tax Exemption
  - Property Tax Deferral
  - Low Income Home Energy assistance Program



\*The products and services described for Healthy Rewards are neither covered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the CIGNA Medicare Access<sup>®</sup> grievance process. Some Healthy Rewards are not available in all states.



# Choose CIGNA



- **90%** approval rating
- **Best** and **easiest** U.S. health insurers

## Enroll October 9 – November 10

- Phone **1.800.942.6724**
- Web **[www.oe2010.ga.gov](http://www.oe2010.ga.gov)**
- Complete a **change form**

Source: NY, Reuters – Analysis published on May 29, 2008, by athenahealth, Inc., a claims-processing and physician services company. Source: DAVIES 2009 National Payor Survey – published on March 3, 2009

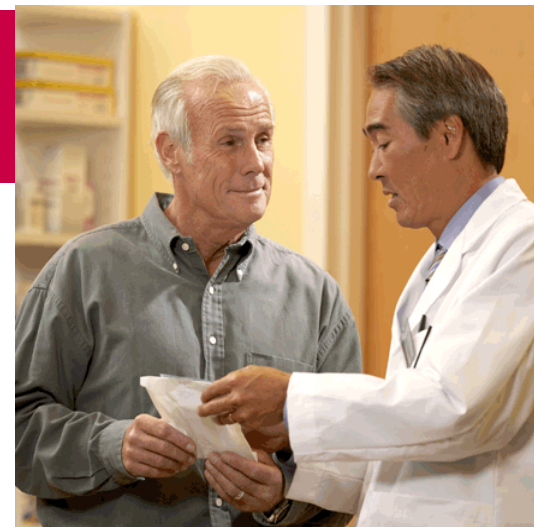
# UnitedHealthcare<sup>®</sup> MedicareDirect<sup>™</sup> Retiree Plans



**Better health solutions from a company you know and trust.**

## **Length of Service**

- Eight years of service to SHBP families
- Over 600,000 SHBP members enrolled in UnitedHealthcare; 94% of all eligible retirees



\*Source: UnitedHealth Group 2008 Annual Report



# UnitedHealthcare<sup>®</sup> MedicareDirect<sup>™</sup> Retiree Plans

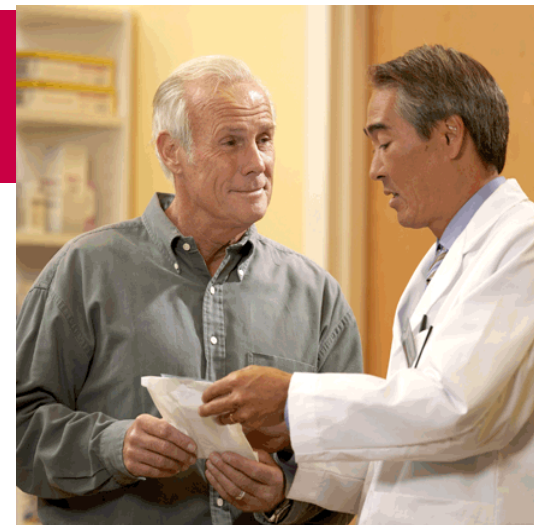


**Better health solutions from a company you know and trust.**

## **Experience**

**One of the nation's largest providers of health care coverage for older adults**

- Over 25 years of experience
- Nationally, we serve one in five people eligible for Medicare\*
- UnitedHealth Group is consistently ranked among the most admired health care companies by *Fortune Magazine* annual survey



\*Source: UnitedHealth Group 2008 Annual Report



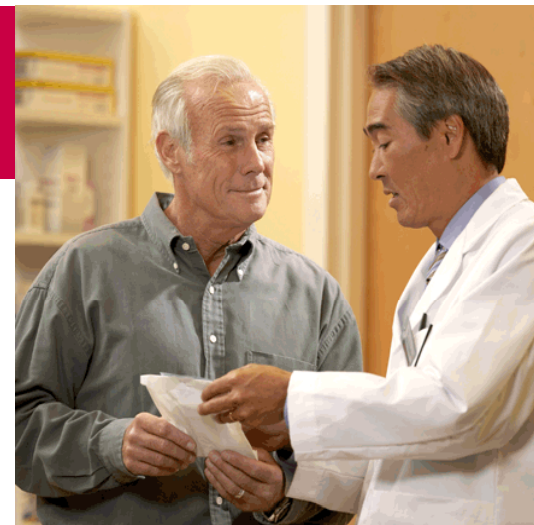
# UnitedHealthcare<sup>®</sup> MedicareDirect<sup>™</sup> Retiree Plans



**Better health solutions from a company you know and trust.**

## **Familiarity**

- Personal support for you and your family
- Continued access to your claims and enrollment history
- **Keep your trusted physicians**
- **Access to your medications** – 100% of the drugs on our PPO plan are covered (formulary pending CMS approval)



\*Source: UnitedHealth Group 2008 Annual Report



**We make it easier ... to save  
you time.**

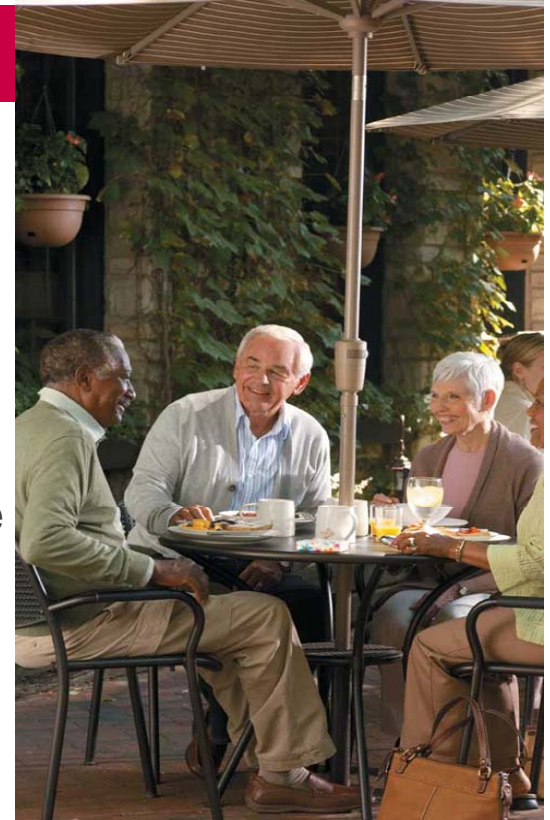


**Relax. We've got you covered.**

## **Dedicated SHBP retiree customer service**

**In a recent survey\* of SHBP MedicareDirect Retirees:**

- **100%** of all members responding were satisfied with the availability of our customer care representatives
- **99%** of all members found their call center representative to be pleasant, courteous and responsive



\*Internal study of SHBP members using customer service, March – April 2009



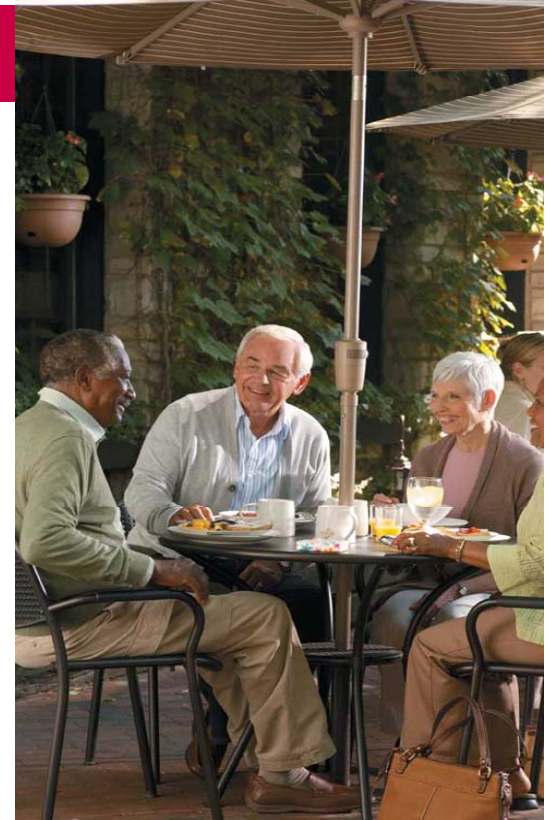
**We make it easier ... to save  
you time.**



**Relax. We've got you covered.**

## **Convenience of a local Georgia and national pharmacy network**

- Over 60,000 national network pharmacies
- More than 2,100 retail pharmacies including 675 independent (non-chain) pharmacies throughout Georgia
- Added convenience of mail order



\*Internal study of SHBP members using customer service, March – April 2009



We make it easier ...  
to save you time.



Relax. We've got you covered.

# Easy enrollment for 2010



\*Internal study of SHBP members using customer service, March – April 2009

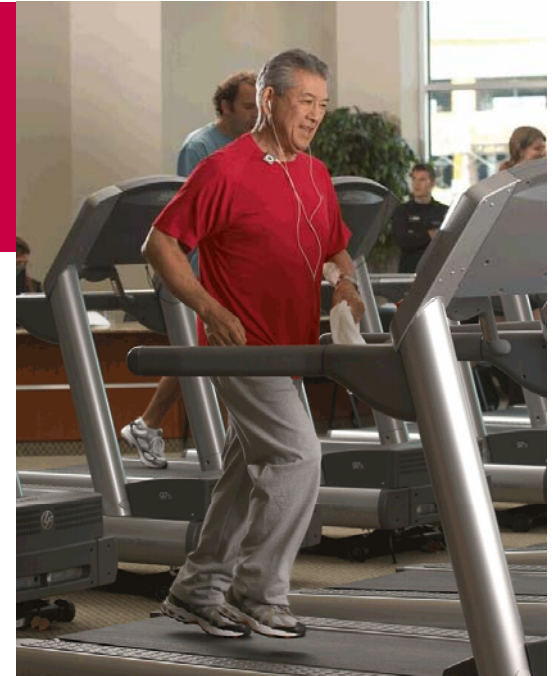
# Personalized support for your health.



**Customized programs to support  
your unique health care needs at no  
additional cost.**

## **Prevention and wellness programs – help keep you healthy**

- SilverSneakers
- Wellness coaching
- NurseLine<sup>SM</sup>
- Solutions for Caregivers



# Personalized support for your health.

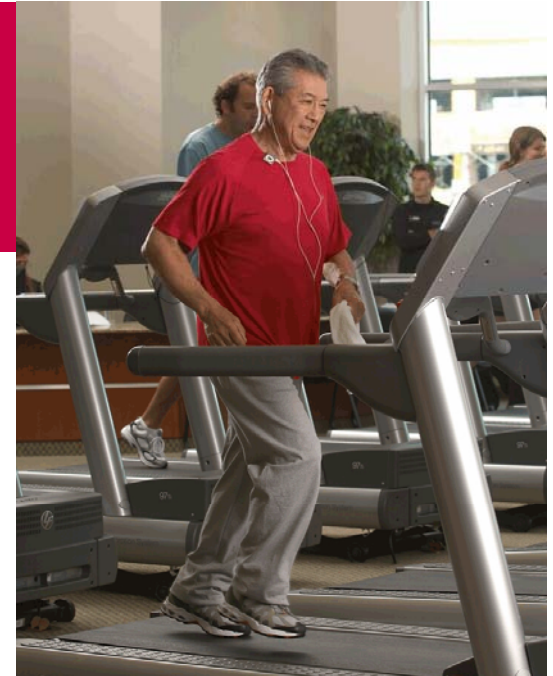


**Customized programs to support  
your unique health care needs at no  
additional cost.**

**Illness and disease management –  
to help keep you in control**

**Personal health management –  
to make it easier**

**Advanced illness programs –  
to provide caring support**



**We make health care more affordable.**



**Our plans help you save money and help maximize your benefits.**

- Annual limits on out-of-pocket expenses
- Predictable copayments
- No additional premium for prescription drug coverage
- Customized plan benefits



**We make health care more affordable.**



**Our plans help you save money and help maximize your benefits.**

## **UnitedHealth Allies**

- **Continued access for UnitedHealthcare members**
- **Take advantage of discounts of up to 50%**

The products and services described are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the UnitedHealthcare grievance process.



**We make health care more affordable.**



**Our plans help you save money and help maximize your benefits.**

**Stay with the company you know and trust.**

**Questions?**

**1-877-755-5343, TTY 711**

**8 a.m.–8 p.m. local time, 7 days a week**

